

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF INDUSTRIAL ACCIDENTS

REVIEW CRITERIA
EFFECTIVE JULY 1, 1993

CRITERIA NUMBER 16 - KNEE JOINT REPLACEMENT

I. Narrative Description:

A. Knee Joint Replacement

II. History/Symptoms:

A. Must meet all of the following:

1. Limited range of motion; **and**
2. Night pain; **and**
3. No relief of pain with conservative care

AND

III. Physical Findings:

A. Not Addressed in Guideline

AND

IV. Diagnostic Testing:

A. Positive findings (significant loss or erosion of cartilage to the bone) of one of the following:

1. Standing x-rays; **or**
2. Arthroscopy

V. Special Instructions:

A. *If 2 or 3 knee compartments are affected a total joint replacement is indicated. If only one knee compartment is affected, a unicompartmental or partial replacement is indicated.*

VI. Level of Care Required:

A. *Inpatient*